## NIH Labor-Management Partnership Council Meeting Minutes Monday, March 18, 2002

<u>Attendees:</u> Tony Clifford, Howard Hochman, Clyde Bartz, Michael Laven, Chris Pyles, Paul Donaldson, Charles Palmer, Mike Showers, Tim Wheeles, Sharon Steinberg, Penney Baile, Linda Tarlow and Barry Kevin.

Facilitator: Fern Kaufman

Old Business: Minutes of the Tuesday, January 22, 2002 meeting were reviewed and approved.

## New Business:

The CIVIL Program: Ms. Sharon Steinberg, Coordinator of the CIVIL program at NIH presented a briefing on the program. Handouts were distributed. The CIVIL Program is a coordinated service designed to prevent workplace violence through education, assistance and intervention. The primary focus is prevention and helping both front line staff and managers recognize signs and situations where intervention would be appropriate and know whom to turn to for assistance. Ms. Steinberg requested that the meeting attendees consider asking her to come talk to their managers, supervisors and workers in an effort to get the word out on this vital program.

A-76 Briefing: Mr. Tim Wheeles, OMA, presented a Fair Act/A-76 update. OMB has directed agencies to conduct cost comparisons or direct convert not less than 5 percent of all positions listed on their FAIR Act commercial inventory by the end of FY 2002 (approx. 465 positions at NIH), and an additional 10% for FY 2003 (approx. 900 positions). The competitive process has been delegated to the ICs and OD for their respective positions in 2002 and will be instituted NIH-wide in FY 2003. In 2003, cost comparisons will be for activities that are determined to be corporate in nature, not inherently governmental. Commercial activities are defined as:

- Government Commercial Core.
- Commercial Competitive (subject to streamlined or full A-76 review).
- Commercial exempt (direct research, patient care, 10 FTEs or less).

OMA ensures activities meet OMB criteria as inherently governmental. OMA is working with ICs and OD offices to develop a listing of all NIH activities, and will then ask ICs to link FTEs to the activity, the A-76 Steering Committee will then make an assessment based on a predefined list of factors to determine which activities are most appropriate for cost comparison, including, but not limited to, the process' level of interaction or dependency on inherently governmental activities.

The A-76 Oversight Steering Committee has been established. Mr. Leasure is the Chair, and it is composed of 10-12 Executive Officers and senior OD staff. The committee is supported by OMA. A contractor is being hired to work on the A-76 comparisons for FY 2003 and a communications sub-committee is being established to get the word out to the ICs.

Police Officer Bartz discussed the negative impact the uncertainty related to an A-76 study for the police officers at NIH is having on the morale of his officers. Mr. Wheeles stated that DOD experience has shown that 50-70% of all comparisons come out in favor of the government entity and that Secretary Thompson has stated publicly that "all employees will have a job." Therefore no RIFs are expected to result from downsizing due to a comparison.

Mr. Clifford briefly discussed the situation within DES where alterations and minor construction work is being phased out of Public Works so they can focus on their core mission of facility operations and maintenance. Because of the large backlog of vacancies in operations and maintenance positions, it is expected that workers will be redeployed to positions supporting operations and maintenance related work with appropriate training provided.

Mr. Laven mentioned that he had heard a rumor that the A-76 studies at NIH were fast-tracked, and that is causing concern. Mr. Wheeles stated that there are no A-76 studies that are fast-tracked; in fact, he said that a DOD analysis determined that a routine A-76 comparison takes about 2 years, and a full-blown study take about 3 years. He also mentioned that the government entity is allotted a 10% cost buffer in the cost comparison against the lowest bidding outside contractor.

Mr. Donaldson mentioned that DoD Fire Service has a moratorium in place to prevent them from being studied under the A-76. He asked if that consideration should apply to those personnel at NIH, considering bioterrorism alerts and other related matters. Mr. Wheeles stated that he was unaware of the criteria used to make that determination, but would take a look at it if Mr. Donaldson could get some information on the issue from the firefighters union at the Pentagon. Mr. Donaldson said he would look into it.

Finally, Mr. Wheeles discussed the role of the unions in the A-76 process. NIH has assumed the position that competing an activity is at the discretion of Management; however, some bargaining agreements detail the time requirements as to the notification of the union representative once an activity has been identified for competition. The NIH management, through the A-76 Oversight Steering Committee, is mindful of the value in including the union in all phases of this process. In an effort to foster that working relationship he has asked to be a permanent agenda item for the monthly Partnership Council meetings where he will provide the latest developments from the Oversight Steering Committee and relay Union concerns to the Steering Committee.

Parking rules for NIH employees and contractors on NIH campus: Police Officer Bartz explained that NIH government employees do have preferential parking privileges through the parking pass system. There is a deficit of parking spaces on campus, and space will continue to be an issue. Mr. Clifford explained that there are two types of contractors, ones who have no parking privileges, such as construction workers, and those that have parking privileges off-campus. NIH provides shuttle service from the remote lot on Pooks Hill. The problem arises when contractors deliberately park on

campus, in unauthorized spaces, and factor in the cost of the ticket they may get as the price to park.

<u>Future of the Partnership Council:</u> During the September meeting, the council discussed the expired Partnership agreement and decided to continue meeting on a monthly basis for the next six months, but that if no agenda items were submitted the meeting would be cancelled and they would re-evaluate in six months time.

Moving forward six months to the current meeting, a discussion ensued as to the value of continuing the Council meetings. Mr. Clifford stated that he thought the process was working OK, and many attendees agreed. Ms. Kaufman stated some of the possible options: to continue with the status quo, to pursue more dialog on the issue or to terminate the agreement and dissolve the council. All participants agreed to maintain the monthly meeting. Mr. Wheeles stated he would be glad to be a permanent agenda item, and all agreed. Additionally, a concensus was reached to make the guest speaker a permanent agenda item.

Ms. Kaufman referenced the expired Partnership Principles Agreement, and broached the idea of revising it. A brief discussion ensued, and it was agreed that for this six-month period the Council would keep the process on an informal basis.

<u>Miscellaneous:</u> Mr. Clifford stated that the groundbreaking for the new NIH Firehouse is scheduled for April 4, 2002. The time of day has not been determined yet.

Next meeting: Monday, April 15, 2002, 1:30 pm to 3:30 pm in Building 31, Room 6A35.